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29855

01/25/2006

WONG, CABELLO, LUTSCH, RUTHERFORD & BRUCCULERI. P.C.

20333 SH 249 SUITE 600 HOUSTON, TX 77070

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(Depositor's name	Stephanie E. Davis
(\$ignature	K - 5 Page
(Date	4-18-06

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	Constitution
09/884.174	06/19/2001	Brian Johnson 04/1		/2006 CHGUYENIS 000001	06 501922   09884174
title of invention: A	pparatus and methoi	D FOR CLOCK DOMAIN C	Rossing with integrate 01 FC 02 FC	D DECODE :1501 1400.00 D	A
APPLN. TYPE	SMALL ENTITY	ISSUE PEE	PUBLICATION FEE	TOTAL FEE(\$) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/25/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		•
EL ANDE ARI	SEL MONTEM I	2116	713-400000		

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- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
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- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
- <sup>1</sup>-Wong, Cabello, Lutsch,
- Rutherford & Brucculeri
- 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Micron Technology, Inc.

Boise, Idaho

Please check the appropriate assignee category or categories (will not b	e printed on the patent): Li ledividual Corporation or other private group entity Li Government
4a. The following fee(s) are enclosed:  Issue Fee Publication Fee (No small entity discount permitted)  Advance Order - # of Copies	4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501922 (enclose an extra copy of this form).
5. Change in Entity Status (from status indicated above)  \[ \begin{align*} \text{ \text{\text{L}}} & Applicant claims SMALL ENTITY status. See 37 CFR 1.27. \end{align*}	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature	Date 4-18- 200G
Typed or printed name Terril G. Lewis	Registration No. 46,065

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